

U.S. Department of Justice
 United States Marshals Service

PROCESS RECEIPT AND RETURN

PLAINTIFF ANDRE BURNETTE - #2006-0001798		COURT CASE NUMBER 08 C 2109	
DEFENDANT TOM DART, ETAL.		TYPE OF PROCESS SUMMONS & COMPLAINT	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN JOHN MULLER, C.R.W., SPERVISOR, AT COOK COUNTY JAIL - DIVISION 5		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) 2700 SOUTH CALIFORNIA AVENUE - CHICAGO, IL 60608, Legal Dept. 2nd Fl. Div. 5		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	1
ANDRE BURNETT - #2006-0001798 COOK COUNTY JAIL P.O. BOX 089002 CHICAGO, IL 60608		Number of parties to be served in this case	1
		Check for service on U.S.A.	X

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

FILED
 Aug 5, 2008
 AUG 05 2008 RC

Fold

MICHAEL W. DOBBINS
 CLERK, U.S. DISTRICT COURT

Signature of Attorney other Originator requesting service on behalf of:	<input checked="" type="checkbox"/> PLAINTIFF <input type="checkbox"/> DEFENDANT	TELEPHONE NUMBER	DATE
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SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 24	District to Serve No. 24	Signature of Authorized USMS Deputy or Clerk RT	Date 06-10-08
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I hereby certify and return that I ☐ have personally served, ☒ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (If not shown above) Ronna Fernandez	<input type="checkbox"/> A person of suitable age and discretion then residing in defendant's usual place of abode
Address (complete only different than shown above)	Date 7/21/08 Time 12:00 pm
Signature of U.S. Marshal or Deputy P. B. [Signature]	

Service Fee 48.00	Total Mileage Charges including endeavors 6.79	Forwarding Fee 0	Total Charges 54.79	Advance Deposits 0	Amount owed to U.S. Marshal* or (Amount of Refund*) 54.79
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REMARKS: 1 DUSM 1 HOUR 14 MILES

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

PRIOR EDITIONS MAY BE USED